**PROFIT CORPORATION** ANNUAL REPORT

1999

DOCUMENT # L26455 SAFE CARGO FORWARDERS, INC.



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90090 046 \*\*\*150.00



Principal Place of Business Mailing Address					-	INTIL MINTE NEUTL ALDE	ł BJEJI 1881
% MARIA G. GIL C/O MARIA G. GIL							
8850 NW 24 TERRACE 8850 NW 24 TERRACE							
MIAIMI FL 33172 MIAMI FL 33172				DO NOT WRITE IN THIS SPACE			
us us					3. Date Incorporated or Qualifed		
		· · · · · · · · · · · · · · · · · · ·			10/31/1989 4. FEI Number	Angli	ed For
<b>—</b>	ace of Business	2a. Mailing Address				<del> </del>	
21 26					65-0155791	\$8.75 Add	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	Fee Requ	- 1	
22     27				a Floation Composing Financing	\$5.00 M		
23 28				6. Election Campaign Financing Trust Fund Contribution	Added to I		
	Zip Country Zip		Cou	ntry	8. This corporation owes the current year Inc	tangible	
24	-25	29			Personal Property Tax.	¥ Yes ⊡	Νο
24	9. Name and Address of Curre				10. Name and Address of New Registered	Agent	
				81 Name			
	Maria G.			82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
8850 NW 24 TERRACE				or Street Addit	CSS (1.6. DOX 11d11DC) 18 110(1.000ptes.o)		
MIAM	II FL 33172			83			
				84 City		85 Zip Co	de
					FL	_     `	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	·						
	Signature, typed or printed name of registered as	<u> </u>		Agent signature required	d when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTOR	S IN 12
12.		AND DIRECTORS	13.	) E	ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	D MADIA C	· Deterte	1.2 NA				_  ;
NAME	GIL, MARIA G. 8850 NW 24 TERRACE			REET ADDRESS			
STREET ADDRESS	MIAMI FL			Y-ST-ZIP			
CITY-ST-ZIP	MIAMI FL	☐ DELETE	2.1 TIT			Change	Addition
1.		<b>3</b>	2.2 NA				
NAME				REET ADDRESS			
STREET ADDRESS				TY-ST-ZIP			
CITY-ST-ZIP		DELETE	3.1 TF			[] Change	Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 ST	REET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			
TITLE		☐ DELETE	4.1 TI			[] Change	Addition
NAME			4, 2 N	WE			
STREET ADDRESS			4.3 ST	REET ADDRESS			
\ CITY-ST-ZIP			4,4 CI	ry-st-zip			
TITLE		☐ DELETE	5.1 TII			Change	Addition
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET ADDRESS			
CITY-ST-ZIP			5.4 Cr	Y-ST-ZIP			
TITLE		☐ DELETE	6.1 TI	LE		☐ Change	Addition Addition
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET ADDRESS			
CITY-ST-ZIP			6.4 CI	ry-st-zip			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  $\lambda$